

PROPOSITION 36 WAIVER FOR PROGRAM PARTICIPATION

You have committed a drug related parole violation and you have been determined to be eligible for drug treatment instead of revocation, as outlined in the California Penal Code Section 3063.1 (Proposition 36). As part of your drug treatment, an assessment will be made which will determine a specific drug treatment plan that you will receive. You must participate in and successfully complete the treatment program to which you are assigned. The program could be up to one year in length with up to six months of aftercare. This treatment may be an outpatient or education program or the treatment may be a residential program. At any time during drug treatment, your treatment plan may be altered based upon your program progress and compliance. Altering your treatment plan may include, but is not limited to, more intensive treatment.

You are aware that you may be required to contribute to the cost of your placement in a drug treatment program, if reasonably able to do so.

If you are currently in custody, you will be required to report to your parole agent no later than the first working day following release unless otherwise directed from your parole agent.

To accept the above instructions, you must waive your right to a parole revocation hearing. Or, you may decide to insist upon a revocation hearing. If you are later found guilty at your revocation hearing you may still accept the treatment instructions, if they are again offered to you. Or, you may refuse participation in Proposition 36 treatment.

CHECK ONE BOX ONLY:

☐ I **waive** my right to a parole revocation hearing regarding my drug related violations of parole. I **will participate** in the Proposition 36 treatment as outlined in the California Penal Code Section 3063.1. I understand that by participating in Proposition 36 treatment, I agree to the requirements and responsibilities outlined above. Failure to fulfill the requirements outlined above will result in a new parole violation. If the Board of Prison Terms (BPT) proves I did not succeed in treatment, my parole may be revoked.

I authorize the assigned treatment providers under Proposition 36 to disclose information and records to the BPT and the California Department of Corrections (CDC) relating to my placement, status in the program, diagnosis attendance, prognosis, urinalysis results, cooperation with the program and any information leading to discharge from the program.

The purpose of this release is to inform the BPT and CDC of my eligibility and/or acceptance into the treatment program, prognosis, compliance and progress in the program. I understand that my consent cannot be revoked until I discharge from parole.

I also understand that any disclosure made is bound by Part 2 of Title 42 of the Federal Regulations Code, which governs the confidentiality of substance abuse patient records, and that recipients of this information may re-disclose it only in connection with their official duties.

SIGNATURE	CDC NUMBER	DATE
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☐ I **do not** waive my parole revocation hearing. I may still be eligible for Proposition 36 treatment if good cause is found, or I may be returned to prison.

SIGNATURE	CDC NUMBER	DATE
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☐ I **refuse** participation in Proposition 36 treatment as outlined in the California Penal Code Section 3063.1. I understand that this refusal may ultimately result in a return to prison for this violation.

SIGNATURE	CDC NUMBER	DATE
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PAROLEE NAME	CDC NUMBER	PAROLE UNIT	AGENT OF RECORD
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